

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED

2014 APR 23 11 AM 11 338

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12 FEDERAL MAIL CENTER

CHILDREN FOR CONGRESS COMMITTEE

ADDRESS (number and street)

P.O. BOX 1348



Check if different
than previously
reported. (ACC)

BYRON

GA

31008

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00560359

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

GA

102

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

5. Covering Period

01 / 01 / 2014

01 / 01 / 2014

01 / 01 / 2014

through

03 / 31 / 2014

03 / 31 / 2014

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Vivian L. CHILDS

Signature of Treasurer

Vivian L. Childs

Date

04 / 13 / 2014

04 / 13 / 2014

04 / 13 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Childs for Congress Committee

Report Covering the Period:

From:

01, 01, 2014

To:

03, 31, 2014

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

6,371.00

6,371.00

(b) Total Contribution Refunds
(from Line 20(d))

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

6,371.00

6,371.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

7,036.55

7,036.55

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

7,036.55

7,036.55

8. Cash on Hand at Close of
Reporting Period (from Line 27)

9,334.45

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

1,000.00

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Childs for Congress Committee

Report Covering the Period: From:

01' 01' 2014

To:

03' 31' 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
- (i) Itemized (use Schedule A).....
- (ii) Unitemized.....
- (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

2,800.00

1,571.00

4,371.00

2,000.00

6,371.00

2,800.00

1,571.00

4,371.00

2,000.00

6,371.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

10,000.00

10,000.00

10,000.00

10,000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

16,371.00

16,371.00

DETAILED SUMMARY PAGE of Disbursements

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

7,036.55

7,036.55

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

7,036.55

7,036.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

16,371.00

25. SUBTOTAL (add Line 23 and Line 24).....

16,371.00

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

7,036.55

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

9,334.45

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 3

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

A. Pill, Lott

Mailing Address

425 Petunia Rd

City

Ocala

State

GA

Zip Code

31774

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Farmer/business owner

Receipt For:

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

50000

Date of Receipt

03 / 12 / 2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sack, Edward

Mailing Address

7112 Lakeview Rd

City

Statesboro

State

GA

Zip Code

30461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

James L Oaks III Enterprise

Business

Receipt For:

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 / 05 / 2014

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Wilson, Darryl

Mailing Address

3278 Yorktown Drive

City

Roswell

State

GA

Zip Code

30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

02 / 28 / 2014

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1,250.00

14031223853

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

A. Shingler, Linda

Mailing Address

P.O. Box 158

City

Byron

State

GA

Zip Code

31008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

01/20/2014

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Goddard, Rick

Mailing Address

213 Westbury Ct

City

Warner Robins

State

GA

Zip Code

31088

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Air Force

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

02/22/2014

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Roger, Lee

Mailing Address

P.O. Box 2202

City

Canyon Lake

State

TX

Zip Code

78133-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Business man

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

01/31/2014

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

950.00

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 3

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle, Initial)

Everett, Ashante Y

Mailing Address

237 Due West

City

Stockbridge

State

GA

Zip Code

30281

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Educator

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

02 / 24 / 2014

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle, Initial)

Wells PAC Congressman Austin Scott, chairman

Mailing Address

2470 Danwells Bridge Rd Ste 121

City

Athens

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.

C00500793

Name of Employer

Occupation

Congressman

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2,000.00

Date of Receipt

03 / 21 / 2014

Amount of Each Receipt this Period

2,000.00

Full Name (Last, First, Middle, Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

00 / 00 / 0000

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2,600.00

4,600.00

14031223855

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 4

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

A. Inkspot

Mailing Address

115 Constitution Dr

City

Warner Robins

State

GA

Zip Code

31088

Purpose of Disbursement

Signs

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM ' DD ' YYYY
01 ' 21 ' 2014

Amount of Each Disbursement this Period

17120

B. United States Postal Service

Mailing Address

904 Russell Parkway

City

Warner Robins

State

GA

Zip Code

31088

Purpose of Disbursement

Postage and Express Mail

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM ' DD ' YYYY
03 ' 10 ' 2014

Amount of Each Disbursement this Period

3249

C. Georgia GOP

Mailing Address

P.O. Box 55008

City

Atlanta

State

GA

Zip Code

30355

Purpose of Disbursement

Qualifying fee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM ' DD ' YYYY
03 ' 06 ' 2014

Amount of Each Disbursement this Period

522000

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

542369

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 4

☐ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

02, 24, 2014

A. Speedro Imaging Marietta

Mailing Address

200 North Cobb Pkwy, Suite 130

City

Marietta

State

GA

Zip Code

30062

Purpose of Disbursement

Signs

Candidate Name

006

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Amount of Each Disbursement this Period

600.00

B. Speedro Imaging Marietta

Mailing Address

200 North Cobb Pkwy Suite 130

City

Marietta

State

GA

Zip Code

30062

Purpose of Disbursement

Signs

Candidate Name

006

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

03, 21, 2014

Amount of Each Disbursement this Period

336.00

C. Discount Mugs

Mailing Address

12660 NW 115 Avenue Bldg 200

City

Medley

State

FL

Zip Code

33178

Purpose of Disbursement

Campaign materials

Candidate Name

006

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

03, 24, 2014

Amount of Each Disbursement this Period

123.75

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1059.75

14031223857

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 4

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address

215 GA Highway 495

City

Byron

State
GA

Zip Code

31008

Purpose of Disbursement

Post Office Box

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

01 / 30 / 2014

Amount of Each Disbursement this Period

36.00

B. Discount Mugs

Mailing Address

12610 NW 115 Avenue Bldg 200

City

Medley

State

FL

Zip Code

33178

Purpose of Disbursement

Campaign Materials

Candidate Name

006

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 26 / 2014

Amount of Each Disbursement this Period

12375

C. Vista print

Mailing Address

100 Hayden Avenue

City

Lexington

State

MA

Zip Code

02421

Purpose of Disbursement

Campaign Materials

Candidate Name

006

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

03 / 01 / 2014

Amount of Each Disbursement this Period

19444

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

35419

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 4

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Childs for Congress Committee

Full Name (Last, First, Middle Initial)

A. Villa, Prisca

Mailing Address

2818 Molly Drive

City

Lawrenceville

State

GA

Zip Code

30044

Purpose of Disbursement

Web accounts

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

03 / 10 / 2014

Amount of Each Disbursement this Period

19892

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

19892
7,036.55

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

13a

13b

NAME OF COMMITTEE (In Full)

Childs for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Childs, Henry and Vivian L

Mailing Address

206 Rolling Ridge Ct

City

Warner Robins

State

GA

ZIP Code

31088

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Original Amount of Loan

10,000.00

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10,000.00

TERMS

Date Incurred

8/1/2014

Date Due

7/1/2014

Interest Rate

0% (apr)

Secured:

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ➤

10,000.00

TOTALS This Period (last page in this line only)..... ➤

10,000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">C</div>	
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Interest Rate (APR) <div style="border: 1px solid black; height: 20px; width: 100%;"></div> %	
Mailing Address	Date Incurred or Established <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	Date Due <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	
City	State	Zip Code	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="border: 1px solid black; width: 40px; height: 20px;"></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; width: 150px; height: 20px;"></div>		Total Outstanding Balance: <div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div></div>		Location of account: _____ Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div></div> / <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div></div> / <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	
Title _____			

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE OF

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

Childs for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

1000000

1000000

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:	
Childs for Congress Committee		From:	To:
		01 ' 01 ' 2014	03 ' 31 ' 2014

Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A		2,200.00	0
B	Column Total Last Page Only.....	2,200.00	

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate.	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	2,000.00	0	6,371.00	0	10,000.00	0
B	2,000.00	0	6,371.00	0	10,000.00	0

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	10,000.00	0	0	16,371.00	7,036.55	0
B	10,000.00	0	0	16,371.00	7,036.55	0

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	0	0	0	0	0	0
B	0	0	0	0	0	0

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	0	0	7,036.55	0	9,334.55	0
B	0	0	7,036.55	0	9,334.55	0

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures
A	10,000.00	6,371.00	7,036.55
B	10,000.00	6,371.00	7,036.55

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Chilids for Congress
P.O. Box 1348
Byron, GA 31088

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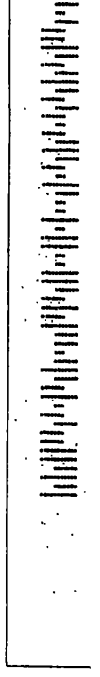
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Federal Election Commission
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Next Business Day Delivery

☐☐

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Date of Receipt

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Date of Receipt

☐

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Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked



PREPARER

(8/2013)

4/21/14

DATE PREPARED

14031223865